

PURPOSE

All five Michigan Department of Health and Human Services (MDHHS) hospitals promote the rights of patients and their preferences with an integrated approach to help MDHHS clinicians address and implement difficult clinical decisions with potentially life changing situations. Consults will offer shared decision making, facilitate education regarding medical issues, help resolve ethical conflicts and answer ethical questions with the individual patient and their hospital treatment team.

DEFINITIONS**Ethics**

A moral philosophy or code of values that inform the fundamental issues of practical decision making and help distinguish between the benefit/ultimate value of an action and the standards of medical action.

Ethics Committee

An advisory group that will offer adult and pediatric consultation service to review ethical or moral questions that arise from active treatment of an individual. The committee is available to meet with patients, family members and staff and to review available medical records.

Ethics Dilemma

A decision-making problem between two or more imperatives, neither of which is unambiguously acceptable nor preferable.

Active Treatment

A continuous process involving ongoing assessment. Diagnosis, appropriate interventions, evaluation of care, treatment and planning for discharge and aftercare under the direction of a psychiatrist.

Capacity

Individual's ability to make an informed decision.

Choice

The freedom to make decisions regarding course of action as supported by principles of person-centered planning, recovery and recipient rights.

Competency

Degree of mental soundness necessary to make decisions about specific issues.

Conflict of Interest

Real or apparent interference of one person's interests with the interests of another person, where potential bias may occur due to prior or existing personal or professional relationships.

Family Member

A parent, stepparent, spouse, sibling, child or grandparent of a patient, or an individual upon whom a patient is dependent for at least 50 percent of their financial support.

Freedom

Acting, thinking or speaking without external imposition as supported by the principles of person-centered planning, recovery and recipient rights.

HIPAA

Health insurance portability and accountability act of 1996.

Intervention

An interaction between hospital staff and a patient that has either one or both of the following characteristics:

- Helps a patient achieve medical and/or behavioral goals and objectives.
- Helps in ensuring a patient stays safe.

Legal Representative

A guardian, parent with legal custody of a minor or a patient advocate designated by the individual to make mental health treatment decisions.

Person-centered planning

A process for developing treatment and supports for the individual patient receiving services that builds upon the individual's capacity to engage in activities that promote community life and that honors the individual's preferences, choices and abilities. The person-centered planning process involves families, friends and professionals as the individual patient desires or requires.

Reasonable

Services and supports desired or required by the patient that are suitable under the circumstances and which do not require excessive or extreme use of resources.

Treatment

Care, diagnostic and therapeutic services (including the administration of drugs) and any other service for the treatment of a serious mental or physical illness. Treatments approved by the physician are intended to help a patient achieve medical and/or behavioral goals and objectives.

POLICY**Standards**

The central ethics committee will provide help to patients, clinicians and hospital staff for all MDHHS inpatient psychiatric hospitals when an ethics consult has been requested. These consults will provide additional assessment of highly complex medical scenarios where contributing factors such as informed consent, patient's expressed desires and treatment plan options are at variance with each other thereby creating an ethical dilemma. It is expected (but not required) that issues would have been first brought to the individual hospital's ethics committee.

Competency

The ethics committee will not have a role in determining an individual patient's competency. That question should already have been decided by the treatment team utilizing standard protocols prior to requesting a consult.

Structure

The makeup of the central ethics committee will consist of two civil service staff members (no contracted employees) from each of the current MDHHS hospitals. Should a hospital have their own individual ethics committee, it is expected that the chair (or another member) of that hospital's ethics committee will be one of the representatives. The second representative should be a member of the hospital's clinical staff. There must be at least one psychiatrist and one medical physician on the committee. The ethics committee will have a chairperson from the Bureau of Hospitals central office.

Process

The central ethics committee will have standard quarterly meetings in addition to meetings scheduled to address specific consultation requests.

The individual requesting a consult will provide the central ethics committee with a detailed summary of all concerns and specifically the ethical conflict(s) that needs resolution. This should include what steps have been taken in the care of the individual and what options are now under consideration.

The committee will work with the treatment team and the individual patient, family member or legal representative to maintain person-centered care, the patient's freedom of choice and provide reasonable treatment options. This may include education in all aspects of medical conditions and treatment, or lack of treatment, consequences.

Once consulted, the members of the ethics committee will have access to all medical records, patient and staff as needed to optimize their review and input (access to Avatar will be granted for the purpose via a defined HIPAA approved method).

There will be no time limit placed on rendering the ethics committee's opinion, but it will be done in the most timely and efficient manner possible. It is understood that some situations may have an urgent need for a resolution and that will be accomplished.

The ethics committee will all review the material for consult. A meeting to discuss the issues will be arranged and ultimately a vote will be taken on the decided resolution. A voting quorum is defined as seven ethics committee members present for the vote.

CONTACT

A central ethics committee consult can be requested by contacting the Bureau of Hospitals Administrative Services.